

IOWA DEPARTMENT OF

INSPECTIONS & APPEALS

APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT LICENSE

TEMPORARY LICENSE VALID FOR UP TO 14 DAYS IN CONJUNCTION WITH A SINGLE EVENT AT A SINGLE LOCATION.

FEE \$33.50

NAME OF EVENT _____ LOCATION OF EVENT _____

CITY OF EVENT _____ ZIP CODE _____ COUNTY OF EVENT _____

DATE OF EVENT: From _____ TO _____ TIME _____

NAME OF BUSINESS _____

NAME OF CONTACT PERSON (NOTE: must be the individual in charge of or supervising this temporary food establishment)

OWNER NAME

MAILING ADDRESS (required)

TELEPHONE NUMBER daytime _____ Evening _____

WHAT DATE AND TIME WILL YOU BE SET UP AND READY FOR INSPECTION? _____

PLEASE COMPLETE THE CHART BELOW (Use additional paper if needed).

ALL FOOD ITEMS	FOOD SOURCE	LOCATION WHERE FOOD WILL BE PREPARED	DATE & TIME OF FOOD PREPARATION
EXAMPLE: Hamburgers	Smith's Market	On Site	7/15/04 11:00 a.m.

FOOD FOR THIS EVENT CANNOT BE PREPARED IN AN UNLICENSED KITCHEN

PLEASE CHECK ONE

Description of Stand/Unit: () Trailer () Truck () Pushcart () Other _____

Type of Overhead Protection: () Canvas () Wood () Metal () Other

Sides Fully Enclosed: () Yes () No

Running Water: () Yes () No () Hot () Cold

PLEASE FILL OUT REVERSE SIDE OF APPLICATION

DO YOU HAVE THE FOLLOWING?

SANITIZER – for surfaces YES _____ NO _____ (TYPE) _____

TEST STRIPS FOR SANITIZER - YES _____ NO _____

DISPOSABLE GLOVES FOR READY TO EAT FOODS - YES _____ NO _____

THERMOMETERS - YES _____ NO _____

What type of hand washing facilities will you be providing for employees/volunteers and how are you providing hot water? Hand sanitizer is not approved for food service.

How do you plan to keep potentially hazardous foods (meat, eggs, dairy products, etc.) above 135°F (HOT) or below 41°F (COLD)?

Fee \$33.50

Signature of Owner/Operator

Date

MAKE CHECKS PAYABLE TO AND RETURN TO THE FOLLOWING ADDRESS:

IOWA DEPARTMENT OF INSPECTIONS AND APPEALS
FOOD AND CONSUMER SAFETY BUREAU
LUCAS STATE OFFICE BUILDING, 3RD FLOOR
DES MOINES, IOWA 50319

OUR APPLICATIONS ARE NOW AVAILABLE ONLINE FOR PRINTING AT:

www.dia.iowa.gov/page29.html

For Official Use Only

Amt _____ Ck # _____ Ck Date _____